PTO/SR/22 (06.03)

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2005 ,,,	ider the P	, aperwork Reduction Act of 199	5, no persons are required to respo	U.S. Patent a	nd Trademark C	Office; U.S.	DEPARTME	03. OMB 0651-0031 NT OF COMMERCE OMB control number.
्रश			F TIME UNDER 37 CI				Number (O	
MAN.			In re Application of: Se Application Number	dlmayr 10/719,104	F	iled:	11/21/20	)03
For: High Efficiency Electromagnetic Beam Projector							jector, a	nd Systems
				ls for Implementation Thereof				
			Group Art Unit: 2872		Examiner: Lee A. Fin			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):								
	$\sqcup$	One month (37 CFR	1.17(a)(1))				\$_	120.00
		Two months (37 CFR	1.17(a)(2))				\$.	<u>450.00</u>
		Three months (37 CF	R 1.17(a)(3))				\$.	1,020.00
		Four months (37 CFR	R 1.17(a)(4))				\$ :	<u>1,590.00</u>
l		Five months (37 CFR	1.17(a)(5))				\$ 2	2,160.00
	Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$							
	A check in the amount of the fee is enclosed.							
	Payment by credit card. Form PTO-2038 is attached.							
	The Director has already been authorized to charge fees in this application to a Deposit Account.							
	or cre	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 502051. I have enclosed a duplicate copy of this sheet.						
I am	the [	applicant/invent	or					
	L		ord of the entire interest. under 37 CFR 3.73(b) is			SB/96).		
		attorney or agei	• •	`		,		
			nt under 37 CFR 1.34(a) umber if acting under 37 CFR					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
	_/(	0- 4-05 Date		4	Signature			<del>-</del>
				<u>F</u>	Roxana H. Y Typed or p	/ang printed r	name	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
:Total of		1 forms are submitted						

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA, 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22323-1450.

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